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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

L&P-1379

Claims as Filed - Part 1

Claims in Patent	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
			Rate	Fee	Rate	Fee
(A) 18	(B) 38	**** 20 =	x \$ ____ =		or	x \$ 18 = 360.00
(C) 8	(D) 6	* 6 =	x \$ ____ =			x \$ 86 = 516.00
Total Claims (37 CFR 1.16(i))						
Independent claims (37 CFR 1.16(i))						
Basic Fee (37 CFR 1.16(h))			\$ ____			\$750.00
Total Filing Fee			\$ ____		OR	\$1626.00

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(i))	***	MINUS **	=	x \$ ____ =		x \$ ____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS *****	=	x \$ ____ =		x \$ ____ =	
Total Additional Fee				\$ ____		OR	\$ ____

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 23-3000
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☒ A check in the amount of \$ 1626.00 to cover the filing / additional fee is enclosed.

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7-14-03
Date

J. Dwight Poffenberger Jr.
Signature of Applicant, Attorney or Agent of Record

J. Dwight Poffenberger, Jr.

Typed or printed name

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